

P O Box 2443 Brenham, Texas 77834 Phone (979) 836-3370 achacutting@yahoo.com

ACHA office use only Date received:
Affiliate:

DATE MEMBERSHIP

					2024 N	lemberchin	
Primary Applicant Information: Member #				2024 Membership Application & Renewal			
Name				1	Applicano	on & Renewa	11
Address				Vali	d from Jan 1, 2024	to Dec 31, 2024 unless Lif	etim
CityStateZip				CHECK ONE:			
					Individual Memb	ership \$50.00	
	ncluded				Annual Househol	d* Membership \$75.00	
					Lifetime Member	ship \$500.00	
Social Security # (Required)					Vouth Mambarch	in \$25.00	
Circle All that Apply: Pro Non Pro Youth Owner Judge Non Pro applicants must attach completed Non Pro Application.  Must have YOUTH D.O.B:  Have you ever shown under another name?				Youth Membership \$25.00 (Must be 18 or under on Jan 1)  Trainer Directory - Add \$10.00 (Contact info will be listed on website)			
children (under 21 years of age and	DDITIONAL ELIGIBLE MEMBER living in the same household as of January	<i>1, 2024)</i>					)r
NAME (first, last)	SOCIAL SECURITY #		IRCLE ON Non-Pro		YOUTH D.O.B	MEMBERSHIP #	
		_	Non-Pro				
			Non-Pro				
American Cutting Horse Association participating under the membership	I acknowledge that all members of my househo, inclusive of but not limited to timely payment of hereby release, discharge, hold harmless the Araccidents arising out of or related to this members.	of all membe merican Cut	ership dues, ex	kpenses, an	nd entry fees. I further agr	ee that all members of my house	hold

I attest that I do not now, nor have I ever received direct or indirect remuneration or other consideration for training of a cutting horse or cutting horse rider.

SIGNATURE OF VOTING MEMBER / AGENT \_\_\_\_\_